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DIFFERENTIATING PSYCHOTIC, DELINQUENT,  
AND CEREBRAL PALSID ADOLESCENTS ON  
THE BASIS OF LETTERS FROM MOTHERS.**

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DIFFERENTIATING PSYCHOTIC, DELINQUENT, AND  
CEREBRAL PALSID ADOLESCENTS ON THE  
BASIS OF LETTERS FROM MOTHERS

A DISSERTATION

SUBMITTED TO THE GRADUATE FACULTY

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degree of

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BY

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1969

DIFFERENTIATING PSYCHOTIC, DELINQUENT AND  
CEREBRAL PALSID ADOLESCENTS ON THE  
BASIS OF LETTERS FROM MOTHERS

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## TABLE OF CONTENTS

LIST OF TABLES .....	Page v
Chapter	
I. INTRODUCTION .....	1
II. METHOD AND PROCEDURE .....	26
III. RESULTS .....	34
IV. DISCUSSION .....	41
V. SUMMARY .....	58
REFERENCES .....	61
APPENDIX A .....	66
APPENDIX B .....	69
APPENDIX C .....	72
APPENDIX D .....	75

## LIST OF TABLES

Table	Page
1. Communication Patterns .....	30
2. Summary of Judges' Sortings into Three Categories .....	36
3. Summary of Judges' Correct Choices in Three Categories .....	36
4. Relationship of Staff Rankings and Experts' Hits .....	37
5. Judges' Tallies .....	38
6. Judges' Choices by Sex .....	39
7. Naive Judges' Sortings .....	40

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CHAPTER I

INTRODUCTION

Since Gregory Bateson's formulation of the double bind hypothesis (Bateson, Jackson, Haley, and Weakland, 1956), there has been an ever-widening interest in the study of intrafamily communication as a source of psychopathology. Although the study of language has become traditional in psychology since Galton's word association tests on himself in 1879, the study of communication prior to Bateson's formulations has typically been ancillary to the issues of personality theory. Only since 1956 has communication become the focus of theoretical concern as an etiological factor in behavior disorders.

Out of the method of investigating the whole family as a unit has arisen the hypothesis that schizophrenia and other behavioral categories are defensive methods of responding to particular kinds of continuing parental communication patterns. This conceptual matrix is quite different from those frames of reference which assume that

psychopathology is an intrapersonal disorder. It is also different from the interpersonal frame of reference which emphasizes early, developmental trauma. It suggests instead that one kind of parental communication begets schizophrenia as a response in children (Bateson, et al., 1956), another spawns delinquency (Ferreira, 1960), still another results in asthma (Block, Harvey, Jennings, and Simpson, 1966).

The theorists whose individual groups have been largely responsible for the thrust of the communication theories and family process research are Gregory Bateson, Theodore Lidz, and Lyman Wynne (Mishler and Waxler, 1965). These theorists regard their efforts as still in the preliminary stages, and none as yet has presented a unified system (Mishler and Waxler, 1968a). Thus far, their experimental work has been concerned almost exclusively with attempts to demonstrate an etiological connection between parental communication styles and schizophrenia. Interest in other behavior disorders like delinquency and neurosis has been, by and large, tangential to this primary focus.

The theorists differ in some significant ways, making unilateral comparisons difficult (Mishler and Waxler, 1965). Jay Haley, of Bateson's group, and Wynne, because of their focus upon family roles and norms, tend to be the most sociological in their analysis of family interaction. Lidz's emphasis on the personality makeup and motivation of individual family members places him closer to traditional psychological concepts. Bateson's attention to the communicative act emphasizes the interactional aspect. However, over the past twelve years all of the theories have attempted to incorporate available



concepts which would strengthen their hypotheses. This "strain for comprehensiveness" (Mishler and Waxler, 1965) has made for a blending of the theories which sometimes obscures the aforementioned differences.

It is not the purpose of the present study to evaluate any of the existing theories. It is not yet clear whether the phenomena being awarded an etiological position in schizophrenia either predate the onset of schizophrenia or are necessarily unique to schizophrenia. However, these theories, and the research they have generated, were the specific impetus for the present investigation. The four sections that follow briefly attempt to place the present study into its historical context.

#### Review of Family Process Theories of Schizophrenia<sup>1</sup>

Although the term "double bind" has become bastardized through popular usage, in its original form the necessary ingredients were well defined by Gregory Bateson:

1. Two or more persons . . . 2. Repeated experience . . .
3. A primary negative injunction . . . 4. A secondary injunction conflicting with the first at a more abstract level, and like the first enforced by punishments or signals which threaten survival . . . 5. A tertiary negative injunction prohibiting the victim from escaping from the field. (Bateson, et al., 1956, p. 253).

It was further specified that the fact of conflicting injunctions is denied; that the child cannot metacommunicate, that is, he cannot comment on nor point to the contradiction in the injunctions; and that

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<sup>1</sup>This review is taken largely from the work of E. G. Mishler and N. E. Waxler (1965).

there can be no non-responding and no not caring (Bateson, et al., 1956, p. 253).

Bateson hypothesized that a child repeatedly exposed to this kind of "damned if you do and damned if you don't" communication would eventually adopt a schizophrenic way of responding as the only means of escape from the paradoxical situation.

In the original hypothesis, the focus was upon the dyadic interaction between mother and child. The emphasis was on the notion that the child was caught in the situation. Since that time, other theorists have expanded the concept to emphasize the role played by the victim as well as other members of the family (Mishler and Waxler, 1965).

Jay Haley (1960) regards the double bind as a phenomenon occurring among all members of a schizogenic family. Each member both employs and is victim of the double bind. He defines every family as a self-corrective social system in which behavior is regulated and formed by internal processes where members set limits to each other's behavior. In the schizogenic family the members refuse to acknowledge that they are setting the rules for each other's behavior. The symptoms of schizophrenia, then, are essentially adaptive responses to the double bind and occur in order to maintain a kind of homeostasis within the family unit. All communication is assumed to be pathological with overt psychosis occurring when one member of the family comes into conflict with the family prohibitions:

. . . when the patient is staying within the rules of his family system, he is behaving 'normally.' However, when he

is required to infringe the rules, and at the same time remain within them, he adapts by schizophrenic behavior. (Haley, 1960, pp. 466-467).

H. Searles and R. Laing have also emphasized mechanisms involving incongruency of messages within schizogenic families. Searles (1959) lists six modes of driving the other person crazy. These modes are: confronting the other person with aspects of his personality of which he is unaware and which may conflict with his ideal or actual self-image; sexually stimulating the person in social situations which disallow a sexual response; relating to the other on two unrelated levels simultaneously---for example, sexual advances during an intellectual-religious discussion; simultaneous or rapidly alternating stimulation and frustration; erratically switching from one emotional wave length to another while discussing the same topic; or switching topics while maintaining the same emotional wave length.

R. Laing (1961, 1965) emphasizes the confirmation of the self. Varying slightly from the Bateson-Haley formulations in his description of the schizogenic family, he stresses the experiencing of the self as the object of the incongruous act. Thus

. . . there is a minimal genuine confirmation of the parents by each other and of the child by each parent, separately or together, but there may not be obvious disconfirmation. One finds, rather, interactions marked by pseudo-confirmation, by acts which masquerade as confirming actions but are counterfeit . . . the schizogenic potential of the situation seems to reside largely in the fact that it is not recognized by anyone; or . . . this knowledge is not brought out into the open. (Laing, 1961, p. 91).

The theories of Theodore Lidz (1957) are much closer to orthodox psychoanalytic concepts which he and his group apply to the family triad - mother, father and child. The critical etiological factor in

schizophrenia is held to be the parents' failure to behave appropriately for their age and sex, either toward one another, or in relation to the child. The child thus learns inappropriate behavior. Empirically, two types of schizogenic families are identified. One is the family organized around a central, dominating, pathological figure, usually the mother, and referred to as skewed. The second is characterized by chronic hostility and mutual withdrawal referred to as schism.

The entire family is seen as pathological with irrational patterns of behavior being taught to the child. Theoretical emphasis is placed upon incestuous and murderous impulses. When a means of escape and withdrawal are needed, psychotic language emerges because the child is less confined by the demands of reality. Having been reared in a setting where the parent characteristically has held to rigid, narcissistic values in communication which contradict or deny culturally accepted ideas of causality and meanings, the child is able to resort to autistic patterns of communication for little more reason than the fact that rationality has no more pull than irrationality.

In discussing the development of schizophrenia in the family, Lyman C. Wynne (Wynne, Ryckoff, Day, and Hirsch, 1958) emphasizes what is called pseudo-mutuality. This is an attempt by each member of the family to maintain the idea or feeling that his own behavior and expectations mesh with the behavior and expectations of the others, whether or not this is true in fact. The emotional investment is directed more toward the sense of reciprocal fulfillment of expectations than toward accurately perceiving changing expectations. Any divergence from the shared role expectations, for example any openly

expressed sense of independent, personal identity, constitutes a threat to the entire family relationship. In the families of potential schizophrenics, deviations from the family role structure are either excluded from recognition or delusionally interpreted. The shared family mechanisms prevent any individual member of the family from differentiating his personal identity either within or outside the family structure.

The onset of acute schizophrenic episodes are viewed by Wynne as evidence of an identity crisis, and occur out of guilt and anxiety as a result of attempting to move out of a particular kind of family role structure. This presumably occurs when the individual, due to external influences or maturation, is no longer able to superimpose the family identity upon his own ego identity. The psychotic symptoms represent a kind of distorted individuation. In the transition from the acute to the chronic schizophrenic state, Wynne sees the re-establishment of pseudo-mutuality, usually at a greater psychological distance from family members, with an increase in guilt and anxiety over subsequent moves toward differentiation, and with heightened autism, loneliness, and emptiness of experience. In a recent paper Wynne and M. T. Singer have described four features they have found successfully differentiate the families of young adult schizophrenics from other families:

. . . first and foremost, patterns of handling attention and meaning (that interfere with the child's capacity for selective attention and purposive behavior); second, styles of relating, especially erratic and inappropriate kinds of distance and closeness; third, underlying feelings of pervasive meaninglessness, pointlessness and emptiness; and fourth, an over-all structure of the family in which members

have collusively joined together in shared maneuvers which deny or reinterpret the reality or existence of anxiety-provoking feelings and events. These shared maneuvers, including what has been called psuedo-mutuality and psuedo-hostility, tend to encompass the experience of the growing child and cut off or render anxiety-laden, experiences with peers and the broader culture. This kind of family structuring, previously described as the "rubber fence" phenomenon, reduces or negates the corrective influence which extra-familial contacts would otherwise have and heightens the impact of the disturbed intra-familial environment. (Wynne and Singer, 1964, p. 10).

### Review of Experiments on Family Process and Schizophrenia

The literature abounds with clinical case histories summarized from the communication framework. Applications of these theories have ranged from accounting for the induction of hypnotic trances (Haley, 1963) to a transactional analysis of Who's Afraid of Virginia Woolf? (Watzlawick, Beavin and Jackson, 1967). But there has also been experimental validation of some of the assumptions.

It appears fairly well documented that mothers of overtly schizophrenic children manifest disturbed or atypical communication styles with respect to the identified patient (Goldfarb, Goldfarb and Scholl, 1966; Lennard, Beaulieu and Embrey, 1965). Mother and child have difficulty understanding one another's expectations (Marcus, Offer, Blatt and Gratch, 1966), perhaps because mothers tend to be abnormally evasive (Beavers, Blumberg, Timken and Weiner, 1965). However, none of the studies thus far reported have offered direct evidence that the atypical manner of relating predated the onset of schizophrenia in the child. The evidence is at best inferential. For example, Andrew Berger (1965) selected 30 statements believed to be typical of double bind communication. He then asked one group of young adult

schizophrenic patients and three groups of non-schizophrenic persons to choose those statements they felt they had heard most often from their mothers. He found that five of the statements successfully discriminated between the schizophrenics and the other groups. Francis Cheek (1965), in a fairly elaborate study, found that mothers of schizophrenics report high values on support and permissiveness in child training, but do not show this behavior in their interaction. In contrast, mothers of normal children report high values of support and permissiveness, and actually behave this way in family discussions.

One method used to determine whether the style of the parents' relating is peculiar to their interaction with their schizophrenic child is the inclusion of a well sibling in the study. Mishler and Waxler (1968b) found that parents change their style of speech between the patient-child and the well child. Another study (Marcus, et al., 1966) demonstrated that the well sibling's ability to communicate with his mother falls in between the ability of patient siblings and children from normal families.

There are, however, studies suggesting that the parental communication styles exist outside the immediate context of parent-child interaction. Daniel Caputo (1963) asked pairs of parents to discuss and reach agreement about items on the Parent Attitude Inventory. His results support the notion that a hostile atmosphere exists in the home of the schizophrenic child. Haley (1962) has reported two experiments in which families were given a task to solve together. Families with a schizophrenic member had a more difficult time forming coalitions than did normal families. Haley (1964) has also reported that when the

who follows whom patterns are compared randomly, the disturbed families are more rigid in sequential patterns than are normal families. These four studies appear to support the assumptions of Haley (1960) and of Wynne, et al., (1958) that the interaction in schizogenic families, apart from the specific parent-child interaction, is rigid and different from normal families.

There is dramatic support for this assumption in two other areas of study---taped interviews and projective tests. Don Jackson, Jules Riskin and Virginia Satir (1961) demonstrated that they could accurately diagnose a schizophrenic son on the basis of five minutes of blind tape from an unknown family therapy session. Morris and Wynne (1965) demonstrated that they could distinguish between parents with schizophrenic offspring and parents of non-schizophrenic offspring solely from excerpts of parental behavior taken from family therapy. And in a later report (Palombo, Merrifield, Weigert, Morris, and Wynne, 1967), they reported a successful, though difficult, attempt to teach this method to psychiatric residents.

Margaret Singer and Wynne (1963) reported an excellent study in which they employed TAT stories and Rorschach protocols to blindly differentiate the parents of 20 autistic children and 20 neurotic children. They went on to differentiate successfully the 20 neurotic children into groups of 10 withdrawn and 10 acting out children. Later, Singer and Wynne (1965) dramatized the predictive use of projective tests by deducing: the diagnosis (3 categories), the form of thinking (fragmented or amorphous), and the severity of disorganization in 35 young adult psychiatric patients by using the parents' Rorschach and TAT test results.



Singer and Wynne (1963) distinguish between what is frequently referred to as the process and reactive schizophrenic patients. They report differences in the styles of relating by the parents of each type. Mishler and Waxler (1968b) also report interactional differences between the families of patients with poor and good premorbid histories. This finding suggests the need for distinguishing between the two types in further research. It also implies the necessity for distinguishing between chronic and acute non-schizophrenic groups if controlled comparisons are to be made.

Lyman Wynne appears to have the most rigorous experimental support for his theory, but it is not without criticism as will be seen.

#### Criticisms of the Theories

None of the family process theories have gone without criticism. Anthony I Schuham (1967) has strongly criticized the Bateson group for their lack of rigorous experimental design. Eugene L. Ringuette and Trudy Kennedy (1966) found that the Bateson group's experts identified no more double bind communication in mothers' letters to schizophrenics than to non-schizophrenics. Schuham cites this study to conclude that if indeed the double bind phenomenon exists, it cannot be experimentally verified. Because of its relevance to the present study, the Ringuette and Kennedy experiment, and Schuham's criticism, will be discussed in detail later.

Other authors are less sweeping in their statements, but raise cogent questions. How stable are family interaction patterns over time, especially over years? What is a sample of family process? Are the

usual family therapy interviews accurately reflective of usual patterns? Since there are more "schizophrenics" outside than inside the hospital, can one sample schizophrenic patients? If a study limited to two groups finds a pattern of behavior in one, does that necessarily exclude such behavior in other non-sampled groups? What does schizophrenia mean? What is the effect of study on natural family interaction? Can significant variables in family interaction be measured? (Lennard et al., 1965).

Some of the criticisms implied in these questions are not unique to family process research. The question of accurate sampling is a usual methodological problem. Definition plagues all research of psychopathology and is usually dealt with through operational definition. Similarly, the stability of a behavioral pattern and the effect of an experiment upon the pattern is a problem common to process research. There is no question that these are real problems, but they are encountered outside the family process framework. Critical to the issue at hand is whether variations in interactional patterns are measurable; and whether they distinguish between identifiable groups.

Another problem evidenced from the many studies cited earlier is how to relate studies of parent-child dyads, family triads and tetrads one to the other. None of the theories are as yet well enough defined to handle these complexities. It has been suggested that the theories are as yet more like well-articulated ways of describing the world than they are scientific theories. (Mishler and Waxler, 1965)

Mishler and Waxler offer many criticisms of the theories (1968b). They point out the lack of clarity in the Haley formulations. The

double bind concept is used in such a generalized way, that all communication sequences may be interpreted as double binds at some level of analysis. This generality obscures the applicability of the formulation. There is also the problem of whose perspective determines the presence of incongruity. What the clinical observer may judge to be incongruous or conflicting messages may or may not match what the receiver of the message perceives as incongruent (Mishler and Waxler, 1968b). In attempting to translate the term pseudo-mutuality into an empirically verifiable factor, Mishler and Waxler found that it was not possible to determine when expressions of support and agreement were pseudo and when they were truly mutual.

Although Lidz gives great weight to the importance of role reciprocity, he fails to give it a precise definition. (Mishler and Waxler, 1965). His frequent reference to role-appropriate behavior with regard to age and sex assumes a model of normatively correct family role behavior which allows little latitude for sub-cultural differences, for example.

The theorists themselves vary in their assumptions about their formulations. Bateson says,

Personally, I do not believe that the theory is at present subject to rigorous empirical testing. At best it can be vividly exemplified by the phenomena of schizophrenia, humor, religion, art, and the like. (Mishler and Waxler, 1968a, pp. 280-281 )

At the other extreme, Wynne says:

I feel confident that from this (experimental) work significant and generally acceptable contributions to our understanding of the origins, development, course, and varieties of the schizophrénias will emerge (Mishler and Waxler, 1968a, p. 284).

In reviewing the family process theories as they presently stand, John P. Spiegel (Mishler and Waxler, 1968a, pp. 288-297) points out that if the clinical outcome of schizophrenia is to be attributed to the family process, then it is necessary to discern the processes involved in other outcomes such as in neurosis, delinquency, and the psychosomatically ill.

Spiegel's observation of the need for study of other identifiable groups appears particularly cogent. It seems premature for the above theorists to argue an etiological connection between intra-family communication and schizophrenia since many of the phenomena reported in family interaction experiments could be explained on the basis of traditional theoretical formulations---bio-genetics, endocrinology, learning theory, or psychoanalysis, for example. It is reasonable to assume that if family interaction patterns do prove to be a necessary condition to schizophrenia, they will not be sufficient. There will still be the problem of relating the communication formulation to the traditional paradigms. There is, for example, a salient feature running through all the communication theories which can be tied to the body of clinical theory. Whether one is considering double binding, skewed, amorphous or fragmented communication, from a clinical framework there is a lack of affirmation of the ego. It seems, in fact, that it is this feature which cuts across all the theories, making for the apparent overlap between them. It may account for some of the experimental failures of the hypothesis (e.g., Ringuette and Kennedy, 1966). Double binding communication may be one way of avoiding affirmation of the ego, but there are others. Thus, it may be simply

that the double bind theory is too narrow. Wynne and Singer have reported that forms of thinking, communicating, and relating in family transactions can be linked in detail to forms of ego organization and ego impairment (reported in Marcus, et al., 1966). Whether one wishes to consider the psychological makeup of the communicator-parent as relevant to the family interaction seems to be a matter of "fielder's choice." Alternatively, it could be argued that the interactional phenomena observed are adaptive responses on the part of family members to the presence of a schizophrenic member, or even situational responses to the fact that one of their own is institutionalized (Mishler and Waxler, 1968b).

It also seems illogical to assume that double binding or pseudomutuality are communication styles peculiar to schizogenic families. The universality of the double bind experience, for example, is popularized in D. Greenburg's How to be a Jewish Mother (1964). If one does assume that these communication styles are both causal and exclusive to schizophrenia, it then becomes necessary to determine what patterns of relating are required to explain delinquency, neurosis, psychosomatic illness, etc. This reasoning could lead to the dubious conclusion that a separate theory is necessary for each behavior disorder.

It seems more prudent to assume that the behaviors held by the theorists to be characteristic of schizogenic families reflect a difference of degree rather than kind. Nonetheless, the popular appeal and the experimental support of the various theories suggest that the formulations reflect substantive phenomena warranting continued

investigation. The task of refining the theoretical concepts and the larger task of coding the concepts into experimental variables lies ahead. For the moment there remains the less refined work of determining whether communication patterns vary between identifiable groups and, if so, under what circumstances.

### Research With Non-Schizophrenic Groups

A very limited amount of effort has been advanced in the direction described above. At the theoretical level, A. J. Ferreira (1960) has proposed the split double-bind as a transactional way of describing the family with a delinquent child. John E. Weblin (1963) has outlined a research scheme for studying the asthmatic patient and his family in an interactional setting. As regards scientific experiment, work has been done with asthmatics (Block, et al., 1966), tuberculars (Farina, 1960), and delinquents (Brigham, et al., 1967; Loeff, 1966; Stabenau, Tupin, Werner, and Pollin, 1965).

Ferreira's split double-bind proposal has apparently not been pursued. Several reasons suggest themselves. Ferreira's example employed an acting out only child of a middle class family not typical of most institutionalized delinquents. He suggested that incongruency of communication occurred not on two different levels from the same person, but from two different persons. He further suggested that a delinquent response by the child constitutes leaving the field (Ferreira, 1960, p. 366). These suggestions do serious damage to the double bind construct. More importantly, they presume two actively involved parents, which seems simply not to fit the reality of most delinquent children.

Although the studies cited thus far have typically used control groups, there appears to be only six experiments in the literature comparing one identifiable group with another; i. e., where the second group has been identifiable as a category apart from being the non-experimental group. Two of the studies, those of Singer and Wynne (1963, 1965), have already been mentioned. A. Farina (1960) compared role dominance in parents of schizophrenics with parents of tubercular patients. David Reiss (1967) compared the solution of perceptual tasks among the families of schizophrenics, hospitalized character disorders, and normals. A group at the National Institute of Mental Health (Stabenau, et al., 1965) did a comparative study of families of schizophrenics, delinquents and normals. Using five families in each of the three matched groups, the authors compared results from: the Revealed Differences Test, Object Sorting Test, and the Thematic Apperception Test. These tests were administered to both parents, the index sibling, and a control sibling who was neither schizophrenic nor delinquent. Normal families were found to have significantly higher clear conceptualization scores on the Object Sorting Test than either the delinquent or schizophrenic families. However, the control siblings in the delinquent and schizophrenic families also scored high. Other results showed lack of stability in role relationships among the delinquent families in contrast to rigid and inflexible roles among the schizophrenic families. Role relationships in normal families appeared both flexible and reliable. The authors reported genuine and freely expressed affection among the normal families, whereas in families with schizophrenic offspring warmth was lacking and affect was over-

controlled. In families with delinquents, affect was regarded as artificial and uncontrolled. The authors concluded that there are differing patterns of relating among the three groups which they believe support the assumption of causality.

Richard G. Loeff (1966) compared delinquent, schizophrenic and normal adolescents in their ability to discriminate conflicting emotional messages. Using matched groups of 24 adolescent girls each, he asked subjects to rate each of a series of statements on a seven-point voice agrees vs. voice disagrees discrimination scale, a seven-point sincerity scale, and four seven-point semantic differential scales. The statements were prerecorded by an actress in one of three ways---with neutral, appropriate, or conflicting verbal affect.

The results disclosed that all three groups were equally able to differentiate conflicting and non-conflicting messages. However, there were significant evaluative differences on the semantic differential scales between the normal group and the two pathological groups. Loeff concluded that either normal individuals repress more, relying more on content than do pathological individuals, or pathological individuals place more weight on metacommunicative elements, therefore using all message elements more equally than do normal individuals.

Loeff's results suggest that the differences between the perceptions of differing pathological groups as regards conflicting emotional messages may not be as easy to get at as suggested earlier. He found no significant differences between the female delinquents' and female schizophrenics' ability to discriminate between conflicting



emotional messages. This raises several questions: (1) Since most studies have been with males, is the connection of intrafamily process with schizophrenia sex specific? This seems unlikely; however, differences in communication styles with respect to male and female offspring may well be revealed with further study (also see Mishler and Waxler, 1968b). (2) Is the ability of the child to discriminate more or less relevant than the congruency of messages in reality? Mishler and Waxler have suggested that although the child's response repertoire is as socially adequate as his well sibling, the messages of the parents of the schizophrenic are more conflicting than those of the parents of non-disturbed offspring. This poses the hoary question of whether or not messages are conflicting if they are not perceived as such by the receiver. (3) Is the sender of the messages relevant to the perception of conflicting metacommunication; i.e., does the emotional involvement of the receiver with the sender affect the receiver's perception? According to Haley (1960), it does. Translated to the family situation, it might be asked if it matters whether the message is sent by the father or mother. In this regard, John C. Brigham (1967) has reported that solitary and social delinquents differ in the etiology of their behavior disorders in that while both varieties have disturbed relations with male authority figures, only the solitary delinquent has disturbed relations with female authority figures. On the other hand, Gene R. Medinnus (1965) compared matched groups of delinquents and controls and offered evidence that delinquents had unfavorable attitudes toward both parents. To further compound the issue of the relevance of the message sender, it is noted that Frank Pedersen (1966)

compared matched groups of disturbed and non-disturbed adolescents whose military fathers were absent, and concluded that the father's absence bore no direct bearing on the child's adjustment. However, he found that the MMPI profiles of the mothers of the pathological adolescents were more disturbed than the profiles of the mothers of the non-pathological group. (4) There remains the question asked earlier---whether the interactional differences being found between the families of schizophrenic populations and the families of controls are (a) a function of styles of relating which are peculiar to schizogenic families; (b) adaptive responses to the presence of a schizophrenic member within the family; or (c) situational responses to the fact that a member of the family is institutionalized.

#### Letters as a Form of Communication

John Weakland and William Fry (1962) postulated that the double bind phenomenon occurs in letters from mothers to their schizophrenic offspring:

It is found that: 1) while the letters vary greatly in details of content, style, etc., they exhibit similar pervasive and highly influential patterns of incongruent communication. 2) These letters agree with another schizophrenic's characterization of such letters generally. 3) The observed pattern fits prior general statements of the authors' research group about the "double bind" and incongruent communication in schizophrenia (Weakland and Fry, 1962, p. 604).

Eugene Ringuette and Trudy Kennedy (1966) tested Weakland and Fry's hypothesis by asking five different groups of judges to rate letters written by (1) mothers of schizophrenics, (2) mothers of non-schizophrenic psychiatric patients, and (3) volunteers pretending to

have sons in the mental hospital. The five groups were as follows:

(1) Experts closely associated with the formulation of the double bind hypothesis, who were asked to rate each of 60 letters on a 7-point scale for the presence or absence of double bind communication; (2) judges trained to understand the double bind concept, and given the same instructions as the experts; (3) experienced clinicians, asked to judge if the letters had been written by the parent of a schizophrenic or non-schizophrenic person; (4) experienced clinicians, asked to sort the letters into their respective groups, that is, those received by schizophrenic patients, those received by non-schizophrenic psychiatric patients, and those written by volunteers; and (5) naive persons, not clinicians, who were asked to rate each letter on a 7-point scale from like to dislike.

Neither the expert nor the trained groups succeeded in judging the presence of double bind communication in such a way that it differentiated the schizophrenic from the non-schizophrenic. Ringuette and Kennedy concluded from these findings, as did Schuham (1967) later, that the double bind is "an unreliable phenomenon or a non-existent one" (Ringuette and Kennedy, 1966, p. 141).

While it is not the intent here to take issue with the Ringuette and Kennedy study, it seems worth noting that the assignment of the schizophrenic label in the average mental hospital is loose at best, if not arbitrary. One might wonder then if the expert judges asked to rate schizophrenic and non-schizophrenic populations were not forced into judging an essentially homogeneous population. Put differently, would the judges have been able to rate parent letters in a differential

way if the non-schizophrenic population had been an otherwise identifiable behavior disorder group, say manic-depressives, delinquents, or a non-psychiatric hospitalized group?

But there is yet another point to be made about the study. Because Ringuette and Kennedy's concern was to determine if the double bind phenomenon could be reliably identified, they made very little out of one interesting finding. That is, all three of the other judge groups discriminated accurately between the letters from mothers of patients and those written by volunteers. This finding supports the assumption that there are observable interactional processes within families which differ between identifiable groups. Ringuette and Kennedy may have raised meaningful questions about the double bind hypothesis; however, they did not discredit the assumption that there are interactional differences between groups, nor that the differences are discernible in letters.

The groups headed by Bateson, Wynne, Lidz and Laing have offered some artful conceptual models which are departures from the traditional ways of viewing psychopathology. To dismiss a model, as Schuham (1967) has done, simply because the as yet loosely shaped construct does not discriminate between poorly defined psychiatric groups, seems analogous to throwing the baby out with the bathwater. Instead, the assumptions could be evaluated with the logico-deductive approach traditionally associated with the scientific method. For example, there have been a number of studies cited which support some of the hypotheses about interactional differences between family groups. The next step is to determine whether there are

observable interactional differences between groups with identifiably different behaviors. If predictable differences are found, as in Reiss (1967) and Stabenau et al. (1965), what must be determined is whether these interactional differences occur as a function of:

(1) responses of the family to the presence of a member manifesting certain kinds of behavior, for example psychotic, delinquent, or neurotic behavior; (2) adaptations to the situation under which the experimental observation occurs or which brings the family to the attention of the observer, for example institutionalization; or (3) an ongoing pattern of interrelating which predates the presence of the classifying behavior, whether that be psychosis or some other type of behavior such as delinquency.

If it is determined that the style of interacting is peculiar to the family with a delinquent, say, it may then be possible to develop a systematic descriptive system which differentiates deviant from normal ways in which people interact, a system thus far lacking (Haley, 1959). If parents of schizophrenic children communicate in a manner identifiably different from other groups, it becomes potentially possible to describe the learning situation which taught the children to be schizophrenic.

Existing studies (Farina, 1960; Reiss, 1967; Stabenau et al., 1965) have offered evidence that the communication patterns of the schizogenic families are not situational; i. e., they are not a function of institutionalization per se. Further investigation is needed, however. Also, it is still an open question whether the interaction patterns are responses to the presence of schizophrenia, or ongoing

styles of communication which have an etiological relationship to the psychosis. It has been suggested that the responsive-etiological argument could be clarified with the study of interaction processes where the child has a physiologically caused illness that results in a behavior (Mishler and Waxler, 1968b). Examples of these are phenylketonuria and cerebral palsy, the manifestation of which may force the family to alter its methods for handling deviance. If families with a cerebral palsied member are no different in their interaction patterns than schizogenic families, then this would be evidence for a responsive interpretation.

#### Problem

Existing research results support the assumption that family communication patterns are related to schizophrenic behavior. Whether the relationship is etiological, responsive, or situational is still unresolved (Mishler and Waxler, 1968b). There is some evidence that there are unique family communication patterns among non-schizophrenic behavior disorders (Reiss, 1967; Stabenau, et al., 1965). These studies fail to support the situational interpretation. However, it has yet to be demonstrated that the observed communication patterns are not the function of the patient status of the child; i. e., are not responsive accommodations to the presence of a child who manifests chronically deviant behavior.

The present study was undertaken to determine whether there are family interactional differences between groups of different behavior disorders, and between the behavior disorders and a non-psychiatric but chronically deviant group. It was reasoned that if

there are no differences in the mothers' communications to schizophrenic, delinquent, and cerebral palsied children, this would support a responsive interpretation. If, on the other hand, significant differences were found, an etiological interpretation would become more plausible.

## CHAPTER II

### METHOD AND PROCEDURE

#### Subjects

The subjects of the study were 30 boys and girls between the ages of 11 and 17 years. There were 10 subjects from each group. Five boys and five girls carrying the psychiatric diagnosis of schizophrenia were selected from the children's service of a state hospital. Since this was the smallest population from which to draw, this selection determined the distribution of the subject's age, sex, and other controlled variables. Five subjects each were selected from among the adjudicated delinquents sentenced to a training school for girls and a training school for boys. Ten patients from a treatment center for cerebral palsy, comprised the CP (cerebral palsied) group.

Using the method of precision controls (Group for the Advancement of Psychiatry, Report No. 42, 1959), individuals of the groups were matched for age, sex, race, socioeconomic status, religious affiliation, mother's age, and the presence of one or both parents in the home. Appendix A presents the identifying information for each subject.

There was one exception to the match for race. A cerebral palsied adolescent who was Indian and matched along other variables



could not be found. A white child who was younger but with similar background was used instead. Also, there was one instance in which it was necessary to use a cerebral palsied child four years younger in order to match other variables.

To avoid differentiation along cultural value or economic class lines, the subjects were matched for socio-economic status in a manner similar to that described by A. B. Hollingshead and F. C. Redlich (1958). The relationships between religious affiliation and socio-economic status were derived from R. R. Dynes (1955).

Acuteness or chronicity of onset was noted for the schizophrenic (S) and delinquent (D) groups as recommended by Mishler and Waxler (1968b).

To the degree possible the subjects were matched for number of siblings and subject's birth rank. All children had spent the major portion of their lives in the maternal home, except for four children whose grandparents had been the parental figures since infancy or early childhood. Four subjects had had a step-father in the home since early childhood. Six subjects had had only the mother in the home since early childhood.

#### Group Selection

In the case of the schizophrenic subjects, professional hospital staff were solicited to help in selecting children who in their judgement had clearly manifested psychotic symptoms such as hallucinations, delusions, or disassociation. The staff were asked to rank the 10 subjects from most to least disturbed, and to judge

each subject to be reactive or process in the development of psychotic symptoms.

In the case of the delinquent subjects, institution personnel helped in selecting those children who clearly manifested repeated aggressive, acting out behavior. The staff psychologist was consulted to assure that none of the subjects chosen had displayed behavior likely to lead to a diagnosis of psychosis. He was also asked to rank the subjects from most to least delinquent, and to judge whether or not the onset of delinquency was acute. There were, of course, two rankings, one each from the girls' and boys' training schools.

The cerebral palsied subjects were chosen on the basis of the presence of serious enough physical involvement to demand definite shifts in techniques for dealing with the child. Caution was exercised to exclude children who in the opinion of the staff psychologist manifested evidence of psychotic or delinquent behavior, or who had siblings known to be psychotic or delinquent. The physical therapist was asked to rank the 10 subjects on the basis of severity of involvement.

#### Data Collection

All letters were voluntarily submitted by the subjects, after the experiment had been described to them individually. Written or verbal authorization was obtained from some mothers, depending upon the requirements established by the particular institution.

Typewritten copies of each letter were made with identifying names and places omitted or replaced with pseudonyms. This precaution

was to insure confidentiality and anonymity. References which would explicitly or implicitly betray the location of the subject were also omitted. The original letters were returned to the subjects.

There were certain references in some letters which required clarification for the judges. These were footnoted. A simulated letter will illustrate:

Dear Joe,

Papa<sup>1</sup> and I have just returned from Xmas shopping. We found a great toy for Dennis and Darren.<sup>2</sup> It is a Hot Wheels outfit in which you actually race little cars. We went to TG&Y, and had a real good time except for running into you-know-who.<sup>3</sup> I swear, one day Papa is going to see that boy when he is in the wrong mood and kill him on the spot . . .

1. Paternal grandfather who has lived in the home the last three years.
2. Joe's 9-year-old twin brothers.
3. Eighteen-year-old boy responsible for the pregnancy of Joe's 15-year-old unmarried sister.

Clarifying information was obtained from the subject and institution personnel.

#### Judges

There were four groups of three judges each: (1) instructed experts, male; (2) instructed experts, female; (3) uninstructed experts; and (4) naive judges.

The instructed male experts were provided with a three hour

orientation program designed to familiarize them with communication theory and hopefully sensitize them to recognizing levels of communication. Specifically, they acquainted themselves with two journal articles, one by J. H. Weakland and W. F. Fry, Jr. (1962) and another by M. T. Singer and L. C. Wynne (1963). A sample letter from a mother of a child in each of the three groups was read. In addition, there was informal discussion until each judge stated that he understood how the communication patterns appearing in Table 1 might occur in letters,

TABLE 1

## COMMUNICATION PATTERNS

- 
- |       |  |
|-------|--|
| I.    | Double bind communication.                               |
| II.   | Omission of personal affirmation when normally expected. |
| III.  | Ego-affirming statements.                                |
| IV.   | Rationalizations.  |
| V.    | Reinforcement of anti-social behavior.                   |
| VI.   | Incomplete thoughts.                                     |
| VII.  | Statements implying inappropriate affect.*               |
| VIII. | Disjointed communication.*                               |
- 

\*Communication patterns included at the request of the judges.

Numbers VII and VIII in Table 1 were included at the request of the judges.

Upon completion of the orientation, each judge was given 30 copies of the letters ordered randomly. He was asked to sort the letters into three categories: (1) those written to schizophrenic adolescents; (2) those written to delinquent adolescents; and (3) those written to cerebral palsied adolescents. In addition, he was asked to tally on a separate sheet the number of times each of the communication patterns outlined in Table 1 occurred in each letter.

The instructed female experts received the same orientation as above, but at a different time than the males because of scheduling conflicts.

The uninstructed experts were given the letters and told that they were letters of mothers to institutionalized adolescents in the three groups. The judges were instructed to sort the letters into their respective groupings on the basis of clinical acumen.

The naïve judges were asked to sort the 30 letters into three groups from most to least liked. They were told only that the letters were from mothers to adolescents in various institutions; and that the experimenter was not investigating literacy, but mothers' attitudes toward children.

Each stack of 30 letters was ordered randomly. None of the judges were told how many letters were from each population.

### Judges' Qualifications

All of the experts were students or graduates of a clinical psychology training program approved by the American Psychological Association. Their previous knowledge of communication theory and transactional analysis varied with individual background, but none had specialized training in the areas.

The instructed male experts were graduate students between the ages of 25 and 30. Two had had three years of graduate training. One had had two years.

The instructed female experts were graduate students, one of whom was 25, two of whom were between the ages of 30 and 40. All three had had two years of graduate training.

The uninstructed experts were male, between the ages of 30 and 37. One had had four years of clinical training plus one year of post doctoral experience. Two had had four years of clinical training including a clinical internship.

The naive judges were women between the ages of 35 and 45 years. Each was a mother of five to eight children. All were college graduates with records of academic excellence. One was a graduate student in fine arts. One had published several fiction pieces. One was a Phi Beta Kappa.

### Statistical Method

The performance of each judge was considered separately. The sorting experiment was treated as 30 independent trials, each with a success probability of  $p = 1/3$ , if categories were chosen at random

for the letters. A table of values of the cumulative binomial distribution (CRC Handbook of tables for Probability and Statistics, p. 202) was consulted to obtain the probability of N or more correct choices (hits) in 30 trials, given the hypothesis of random choice, where N was the number of hits of the judge in question. An interpolation was made between the values  $p = .30$  and  $p = .35$  of the table.

To obtain a measure of the consistency of performance among the nine expert judges, a reliability coefficient developed by Kuder and Richardson (1937) was computed.

In order to compare the performance of the instructed vs. uninstructed judges, and between the instructed male judges and instructed female judges, a Median Test (Walker and Lev, p. 435) was applied.

Also computed were the percentage of hits for the three groups S, D and CP, and the proportion of hits to false-positives for each of these groups.

## CHAPTER III

### RESULTS

#### Sortings

The results of each judge's sorting is presented in Appendix B, with an x marking each successful prediction or hit.

Every expert judge's sorting was significant beyond the .05 level. Two of the instructed male experts had 15 hits each ( $P = .04$ ). One had 16 hits ( $P = .02$ ). Of the instructed female experts, two had 18 hits ( $P = .003$ ). One had 19 hits ( $P = .0008$ ). Among the uninstructed experts, one had 15 hits ( $P = .04$ ), one had 16 hits ( $P = .02$ ), and one had 19 hits ( $P = .0008$ ).

The Kuder-Richardson method of reliability testing produced an interjudge reliability coefficient of .62. There was one letter which all nine of the experts correctly classified; 3 letters which 8 correctly classified; 6 letters which 7 correctly classified; and 10 letters which 5 correctly classified.

Of the six letters about which the majority of experts incorrectly agreed, six judges agreed about one, and five judges concurred in each of the other five cases.

In summary, out of 30 letters there was majority agreement on 26 of them. Of the 26, twenty were correctly classified.



Table 2 summarizes the sortings by each expert. Table 3 summarizes the hits by each expert. There were a total of 151 hits out of 270 possibilities. There were 96 placements in the S group, 97 in the D group, and 77 in the CP group. Although the number of letters placed in the CP group was small, the proportion of hits to false-positives for the CP group was greater than either the S or D groups:  $S = .48$ ;  $D = .56$ ;  $CP = .66$ . The percentages of hits out of actual possibilities were:  $S = 51\%$ ;  $D = 60\%$ ;  $CP = 57\%$ .

With respect to the relationship between groups of experts, the median test applied to instructed vs. uninstructed experts yielded no significant results. However, comparison of the scored hits of the instructed male experts with those of the instructed female experts provided the information that each score among the females exceeded the highest male score. The median test applied to this data showed that, under the assumption that these two samples came from the same population, the probability of such a distribution is .05.

#### Rankings

Table 4 presents the relationship of institution staff rankings and experts' hits. Inspection discloses no significant relationship. Table 4 also allows comparison of hits for acute versus chronic subjects. Even though there are too few acute subjects for statistical consideration, there appears to be no meaningful pattern; the hits for acute subjects range from 3 through 7.

TABLE 2

## SUMMARY OF JUDGES' SORTINGS INTO THREE CATEGORIES

	Male Expert			Female Expert			Uninstructed Expert			
Judge	1	2	3	4	5	6	7	8	9	Total
S	8	13	11	10	10	15	10	7	12	96
D	17	11	8	11	10	8	10	12	10	97
CP	5	6	11	9	10	7	10	11	8	77
Total	30	30	30	30	30	30	30	30	30	270

TABLE 3

## SUMMARY OF JUDGES' CORRECT CHOICES IN THREE CATEGORIES\*

	Male Expert			Female Expert			Uninstructed Expert			
Judge	1	2	3	4	5	6	7	8	9	Total
S	4	7	5	6	5	7	6	2	4	46
D	7	5	4	6	7	6	7	5	7	54
CP	4	4	6	6	7	5	6	8	5	51
Total	15	16	15	18	19	18	19	15	16	151

\*Maximum possible single entry = 10; maximum possible total for each judge = 30; maximum possible total hits = 270.

TABLE 4

## RELATIONSHIP OF STAFF RANKINGS AND EXPERTS' HITS

Rank*	Number of Hits					
	S		D		CP	
	Male	Female	Male	Female	Male	Female
1	7	1	4	4	1	5
2	5	5	7A**	5	8	8
3	5	1	3A	7A	1	5
4	5	5A	8	5A	9	5
5	7	1	4	7A	2	7

\*Ranked from 1 = most severe to 5 = least severe.

\*\*"A" designates acute.

Tallies

Table 5 presents tallies by the instructed expert judges on the eight communication patterns reviewed in Table 1. Inspection discloses that no meaningful relationships occur between the tallies and judges' sortings. Converting the tallies to proportions or ranking them likewise yielded non-significant results.

TABLE 5

## JUDGES' TALLIES

Judge Number	Type of Communication *								Total
	A	B	C	D	E	F	G	H	
1	12	2	5	32	4	1	0	5	61
2	21	22	9	12	2	3	7	2	78
3	8	19	26	7	10	3	12	5	90
4	13	6	32	19	2	2	4	11	89
5	7	9	6	7	1	16	9	16	71
6	9	13	1	7	0	0	8	10	48

\* A = Double Bind communication.

B = Omission of affirmation.

C = Ego affirmation.

D = Rationalization.

E = Reinforcement of anti-social behavior.

F = Incomplete thoughts.

G = Statements implying inappropriate affect.

H = Disjointed communication.

Sex Differences

Table 6 presents a comparison of the hits by male and female experts with regard to male and female subjects.

Six of the nine experts correctly identified more letters to boys than to girls. The three experts identifying a greater number of letters to girls were male. The three expert females had a combined score of 24 correct choices for girls, constituting 44% of their total hits. The six expert males had a combined hit score of 51 for girls, constituting 53% of their total hits. All the experts combined had 77 hits with respect to male subjects and 75 correct choices for female subjects.

TABLE 6

## JUDGES' CHOICES BY SEX

Judge Number	1	2	3	4	5	6	7	8	9
Judge Sex	M	M	M	F	F	F	M	M	M
Male Correct Choices	8	6	8	11	12	9	11	6	6
Female Correct Choices	7	10	7	7	8	9	8	9	10

Total Male Correct Choices = 77.

Total Female Correct Choices = 75.

Naive Judges

Sortings by the naive judges bore no significant relationships to actual diagnostic categories, to selections by expert judges, or to one another. Table 7 summarizes the sortings of the naive judges.

Judges 10 and 11 sorted the letters more or less evenly into three groups. Their choices from like to like least were distributed across the three diagnostic populations with no greater than chance probability of occurrence. Judge 12 placed 21 of the 30 letters in the likemost category. Only five letters were placed in the same category by all three judges.

TABLE 7

## NAIVE JUDGES' SORTINGS

	Subject Type	Judge 10	Judge 11	Judge 12
Liked Most	S	3	4	9
	D	3	2	7
	CP	5	5	5
Liked Less	S	3	1	1
	D	3	3	0
	CP	3	2	4
Liked Least	S	4	5	0
	D	4	5	3
	CP	2	3	1

## CHAPTER IV

### DISCUSSION

Each expert correctly sorted the letters into the respective diagnostic categories with frequency significantly above what would be expected by chance occurrence. These results are viewed as supporting an etiological interpretation of family communication patterns in the development of behavior disorder.

The fact that there was majority agreement on 26 of the letters, and that 20 of these were accurately categorized (reliability coefficient = .62) adds weight to the assumption that there are identifiable communication patterns among groups of varying social deviance. It is not clear whether the family communication style of any one group, schizophrenics for example, is more easily recognized than any other.

At the onset of the study it was anticipated that if judges could differentiate groups of subjects on the basis of mothers' letters, they would have greater difficulty in distinguishing between letters to schizophrenic subjects and delinquent subjects, than between letters to cerebral palsied subjects and the other two groups. The assumption was grounded in the observation that deviant behavior peculiar to cerebral palsy enjoys a degree of social acceptance not

found with respect to the behavior disorders. This assumption proved to be only partially correct. While the proportion of hits to letters placed in the category was higher for the CP (.66) than for the S (.48) or D (.56) groups, there were no significant differences between total number of hits. These results suggest that the judges had a clearer conceptual notion of what constitutes mother-child interaction among the cerebral palsied. However, since only two of the judges had had any sustained contact with a cerebral palsied population, a more plausible explanation may be that the experts had a clearer notion of what kinds of communication do not induce a pathological response.

The lack of any significant difference between the instructed and uninstructed experts suggests four possible explanations: (1) that such a brief orientation to communication theory is of no value; (2) that communication theory has no applicability to the task; (3) that the experimenter was unable to present the material in a way which was meaningful to the judges; or (4) that differences in judges' experience, sex and other demographic characteristics prevent direct comparison. In this regard, it is of note that the female instructed experts were significantly more accurate in their sortings than the male instructed experts ( $P = .05$ ). Depending on one's bias, this could be interpreted as evidence for the greater intuitive and clinical acumen of the female of the species. A case might also be made for the view that women are more sensitive to women's writing (one of the three female judges has children of her own). However, the experimenter's subjective evaluation was that the male experts, as compared to the female experts, entered the orientation with far more preconceived



notions about how mothers of these groups write their children. The males actively disagreed with both the experimenter and one another about the definition of incomplete thoughts, for example. The males also prevailed upon the experimenter to add the two tallying categories: statements of inappropriate affect and disjointed communication. The female experts on the other hand were active, but responded with fewer definitive opinions. Male and female experts were instructed separately; therefore, although content was the same, there remains the question of a possible difference in the amount of information transmitted in the two orientations.

Prior to the study, the experimenter carefully scrutinized the letters in order to delete any information which might be peculiar to a given population or institution. Nonetheless, there was an ex post facto preoccupation with whether there had been content in the letters which allowed the judge to make a correct choice. Individual discussions with the judges affirmed that this was not the case. Their very lively discussions centered around concepts such as double binds, rationalizations, over-protectiveness, and the like.

The argument for female perspicacity is placed into an interesting light by the discovery that it was three of the male judges who identified more letters to girls than to boys.

Most studies have used male subjects. The design of an even split between the sexes allowed for comparison. The mother-child relationship has different demand characteristics for males than females. Also, deviant behavior is defined differently for males than for females in our culture. In particular, female delinquency is poorly

defined. For these reasons, the judges might well have had greater difficulty identifying letters to females than males. Such was not the case (Hits: male = 77; female = 75).

The collective results of the instructed expert tallying also suggest that the orientation served little purpose. There was verbal consensus on the definition of each tallying category during the orientation. However, casual inspection of the judges' individual tallying (Table 5) discloses that each made use of the categories in unique ways. Differences between judges ranged from a total of 1 to a total of 32 on the presence of ego-affirming statements. The difficulties faced by the experts in the Ringuette and Kennedy study (1966) on the double bind hypothesis also became apparent. The number of double bind communications tallied by each judge in the present study ranged from 7 to 21.

It becomes apparent from these results that an operational definition of a communication pattern is no mean task. There was a trend in the tallying, however. Five of the six experts gave the most tallies to a communication pattern related to the diagnostic category in which each as an individual had the most hits; e.g., Judge 1 gave the most tallies to rationalizations and had his most frequent hits in the delinquent group. Rationalization as a communication pattern is presumed to be related most often to families with delinquents. This trend was confounded, though, by the fact that the judges tended to put more letters in the diagnostic category in which they had the most hits; e.g., Judge 1 assigned 17 letters to the delinquent category. It thus appears that each expert had his own

internal criteria for what constitutes a communication pattern. And while these criteria were useful to him, they do not readily admit of transposition from one judge to another.

The acute versus chronic distinction has been given experimental support (Singer and Wynne, 1965; Mishler and Waxler, 1968b). Further, it makes clinical sense. The failure to find a predictable relationship between the judges' sortings and the acute-chronic parameter (Table 4) is probably best explained by the small number of acute subjects (a total of five). It was anticipated that in the case of children who had no history of disturbance (acute), the mothers' communication patterns would be more nearly normal and therefore more difficult for the judges to assess. However, from reading the letters to acute subjects, it appears that some mothers handle their own response to the situation with alarm, while others repress and become superficial. These responses may more nearly fit a situational interpretation; i.e., abrupt changes in the child to deviant behavior likely necessitates rapid accommodation on the part of the family. Mother may adopt communication styles which are not historically typical.

It is apparent from reading the letters that some are more volatile than others; and that some mothers experience a greater sense of immediacy about the adolescent's presence in the institution. This is probably related in part to the child's length of stay in the institution, but is not solely a temporal phenomenon. Experientially, one parent may be relieved by the child's institutionalization, another may feel guilty. Institutionalization may create a rift in one family system, and may reestablish the homeostasis in another. It is worthy

of note that staff members at the different institutions unsolicitedly observed that mothers' letters were richest in content and emotion shortly after the child's admission. None of the letters used in the study had been received by the subject right after admission, but there were considerable differences in the lengths of stay. This factor could not be controlled concomitant with the other variables.

Predictably, it was the relatively bland, matter-of-fact letters with which the experts had the most difficulty. There was some information that could not be made available to the judges which could have increased their accuracy. For example, one letter to an acute schizophrenic girl was correctly categorized by five of the expert judges. How many more judges would have been able to diagnose correctly if they had been told that this was one of two letters per day from a mother who lived in the same town and saw the child on weekends?

Rankings for severity of involvement by staff members of the institutions suffered a number of problems. The most severely involved was operationally defined as the most overtly deviant. Staff encountered difficulty with regard to temporal changes. Some subjects had been more deviant than others, but no longer were because they had been in treatment longer. The CP population was the only group where the rankings could be made with confidence. The fact that no significant relationships were found between the experts' sortings and the severity of involvement cannot be construed to mean that severity of involvement is unrelated to family interaction patterns.

Perhaps the most disappointing result of the study was the apparent failure of the naive judges to be sensitive to the communication styles in the letters. The naive judges were advised that the experimenter was interested in mothers' attitudes toward their children. It was expected that the judges, all mothers of several children, would be particularly sensitive to superficiality and destructive attitudes in the letters. In this regard, it was anticipated that they might sort the letters in the direction of placing those of the cerebral palsied group in the liked most category, and those belonging to the schizophrenic group in the liked least. This of course presumes that the family interaction patterns of the cerebral palsied family is less pathological---an assumption based upon clinical inference rather than experimental evidence. Although there was a trend to put more of the CP group in the liked most category, the trend was slight at best. The lack of any clear relationship between their sortings and the diagnostic categories might be construed as evidence against the notion of observable communication patterns. However, this inference appears disallowed by the fact that there were only five letters upon which the three naive judges agreed. It may be that the task given the naive judges cannot be expected to relate to the expert sortings or diagnostic categories; still, there remains the poor interjudge reliability. The inference that is thus drawn is that clinical training in psychology does serve to sensitize people to communication nuances.

### The Letters

In Appendix C can be found three letters used in the study. There is one from the S group (Display 1), one from the D group (Display 2), and one from the CP group (Display 3). They are the letters which the largest number of expert judges correctly categorized.

In Appendix D can be found three other letters used in the study; one from each group (S, Display 1; D, Display 2; CP, Display 3). They are the letters which had the least interjudge agreement.

From the letters of each diagnostic group emerged salient characteristics which seemed to contribute substantially to the experts' success in sorting.

The letters to the schizophrenic population were characterized by many of the features described in the literature. Double binds were prevalent. An example may be found in the S letter<sup>1</sup> (Display 1) of Appendix C.

Im sending you some pictures of your grandMother and me and you kids and Sam and Angela hope you like them. Keep them if you want them send them back so I can get some reprints.

Fragmented communication and incomplete thoughts were not routine, but were exclusive to the S group. An example may be found in the S letter (Display 1) of Appendix D.

Did you know that this old Skinny Rabbitt was going to have a birthday in a couple of days? I think your birthday list. We will have to start to work on it.

But the most outstanding characteristic of the S letters was the omission of ego-affirming kinds of statements combined with confusion

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<sup>1</sup>Letter received by a schizophrenic subject. This form will be used throughout the discussion.

in role relationships. In the letters of the D and CP groups, there was a strong quality of the I-Thou relationship. In the S letters, this quality was absent or existed in peculiar, idiosyncratic forms. This is particularly exemplified in the opening salutation and complimentary close of the S letters. The S letter in Appendix C begins:

Mr. Bill Flowers  
Box 252 Yourtown, Okla.

and ends:

. . . as ever your Mother  
Anna Lee & all

Anna Lee is the mother's name.

The S letter of Appendix D is signed:

Love

The Skinny Rabbitt

Out of 10 S letters, 8 had either an idiosyncratic salutation or close. None of the D or CP letters had this characteristic. In the two remaining S letters, one ended:

I love you "a bushel and a peck and a hug  
around the neck."  
Love,  
Mother.

The other began:

Dearest Daughter,

and ended:

Love,  
"Mom" and Dad

One closing which is not represented in the S letters of the Appendix was:

Well My Love Good-night - write real soon - Sleep Tight  
Pleasant Dreams

And Plenty of Love  
Your Loving Mom

Although the idiosyncratic salutations and closes were known to be unique to the S letters, this information was not given to the instructed experts. It was felt this would have introduced a factor into the judging which may or may not be constant with written communication to hospitalized schizophrenic patients in general.

There were three outstanding characteristics of the D letters. The first was rationalizations or excuses for one's own behavior. Examples in the D letter of Appendix C (Display 2) are not as rich as in some, but can be noted.

I wrote you one letter and put the wrong addres on it and got it back today. I'll be more careful now. Son Im sorry I sent you the wrong kind of cigts. Ill have to be more careful about selecting them.

Rationalizations were found evident in 8 of the 10 D letters. Rationalizations were also found in the S letters, but the clearness between "you are there and I am here" or "you have an opinion, and I have an opinion" was typically lost in them. This was not invariable, but it was typical. The S letter in Appendix D begins with a rationalization, and there is only slight confusion about role relationships. The varying pattern may account for the lack of interjudge agreement.

The two other outstanding characteristics of the D letters were: moralizing and reinforcement of delinquency. The D letter in Appendix D (Display 2) is the only letter which did not have at least one of the three communication patterns---rationalizing, moralizing, or reinforcement of delinquency.



Neither of the D letters in the Appendix contains moralizing.

Examples taken from three other D letters follow:

We want you to know we love you and only want you to amount to something. That's all we want. We just want you to be a nice woman. A real person, not someone who doesn't really do or know anything. You know what we mean, I know you do, Betty please just consider that . . . (etc)

I love you and try to help you all I can. I'm giving 75% of myself to you and your not even giving 25 back to me. You've got to help yourself before I can help you.

. . . and one day they went to town and of Course they got to drinking and they had a Car wreck she broke her leg's an her hip and hurt her neck she at AnyCity Hospital. She wrote me today I'm just so sorry it happen that way but you know sometimes they would make up there minds and quit drinking like me also that goes for Bill and Junior . . .

Reinforcement of delinquency takes at least three forms. The first is evidenced in the D letter of Appendix C. It is characterized by the mother's reference to people having been involved in delinquent acts. Without immediate provocation she refers to three people who are either in jail or the training school for boys. This may be a sub-cultural phenomenon, but it occurs with regularity.

The second most frequent form of reinforcement occurs in the form of the mother's adopting the vernacular:

You know I would come up this weekend, but I haven't got my wheels.

There are frequent references to activities in which the mother is engaged that would be more appropriate for her teen age children, or at least might better be discussed with other adults:

We went to the Stock Car races Sat. nite and a bar afterwards. Really had a blast.

The third form is not so obvious in single letters. It occurs in the form of reward for delinquent behavior. In a letter not used in the study, one mother chastises her son for bad behavior at the institution, then announces she has bought him a surprise gift. Another urges her daughter to quit smoking but later states she is sending cigarettes.

The CP letters are less easy to characterize except in their lack of the communication patterns ascribed to the S and D letters. The ego-affirming quality discussed earlier is prevalent:

Dad said to tell you hello, and that he is planning a fishing trip for the two of you this week end. (Appendix A, Display 3)

There would seem also to be emphasis upon activity:

What are you studying in school this week? . . . How often do you go swimming now? (Appendix A, Display 3)

This may reflect a preoccupation with physical limitations which is not overtly evident in the letters. There may also be evidence of overprotectiveness; however, this is not as clear as suggested by Schaffer (1964). In general, there is continuity and congruity in the CP letters. Affection is evident, but not abundantly so.

It is interesting to note that the two CP letters incorrectly classified most often by the experts belonged to two subjects whom the staff psychologist regarded as having symbiotic mother-child relationships which verged upon the pathological.

#### Limitations of the Study

Certain shortcomings of the study have already been implied. The question of whether the differences between the male and female

instructed experts was a function of the orientation period or a sex specific difference could have been averted by standardized instructions to both groups simultaneously.

Ideally, the subjects of the study would have been matched for length of stay in the institutions, thus allowing for control of whatever may occur in the mother's communication patterns as a function of the institutionalization. This variable was sacrificed for control of other variables.

Greater attention might have been given the acute-chronic parameter. The number of acute subjects available did not allow for adequate comparison along these lines.

The task designed for the naive judges could not be related meaningfully to the other sortings. A task more similar to that of the expert judges might have yielded more useful results.

The major shortcoming of the study, however, was the lack of a normal group. The availability of letters from normal children away from home proved to be limited to church camps, music camps, and private schools. It was felt that these populations were not necessarily representative of the normal population.

#### Implications for Theory and Research

The impetus for this study was threefold: (1) a concern about the assumptions being made with regard to the relationship between family communication patterns and behavior disorders; (2) a desire to reawaken interest in letters as a means of studying communication patterns following Ringuelette and Kennedy's (1966) lethal blows on the

subject; and (3) a desire to reaffirm the clinical applicability of family process research which has gradually moved toward the reified atmosphere of the research psychologist's laboratory.

The judges' success in differentiating the letters to psychotic, delinquent, and cerebral palsied adolescents is viewed as supporting an etiological interpretation of the relationship between family styles of communicating and behavior disorders. Although the final question of causality cannot be answered without longitudinal studies, the findings lend themselves directly to the question of whether or not the family interaction patterns observed among the behavior disorders are responses to the presence of deviant behavior.

If the expert judges had been unable to discriminate between letters to the cerebral palsied and the other two groups, the likelihood that the family styles of interrelating are no more than a response to deviant behavior within the family would have been enhanced. The positive findings suggest not only that there are differences, but that these differences are clinically observable.

This reasoning does not imply that there is a causal relationship between communication patterns and cerebral palsy; only, that the different communication patterns of families with schizophrenics and delinquents are not a function of the deviancy per se. The limits of this study prevented the inclusion of a normal population. One possibility for further research would be a comparison of the family interaction patterns of the cerebral palsied with those having normal children. Schaffer (1964) reported that 13 out of 30 families with cerebral palsied children were "too cohesive." With one exception,

none of the families of the present study were thought by the staff psychologist to meet this definition. A comparison of families with normal and cerebral palsied children would provide additional data. Given the statements of the expert judges in this study, it is speculated that significant differences in written communication would not be found.

A further implication of the findings is that unique communication patterns are not exclusive to schizophrenia; in fact, communication patterns of the family with a delinquent child may be more readily identifiable. Given the host of studies on family interrelating and schizophrenia, further research into the communication patterns of families of delinquent children appears warranted.

The acute-chronic parameter was not given sufficient attention in this study. That these may be distinguishable types continues to make good clinical sense. Further research in interrelating styles of families with delinquents should include this distinction until it is proved unwarranted.

It was suggested earlier in this paper that it would be illogical to presume that double binds, for example, are peculiar to one behavior disorder. The tallying by the judges tends to support this suggestion. However, there do appear to be communication styles which are used more frequently by one group than another. Thus, rationalizing and moralizing are found among the letters to schizophrenics, but not as often as among the letters to delinquents. Conversely, double binds, fragmented communication, and incomplete thoughts appear to be more characteristic of the letters to schizophrenics.

A major difficulty with these terms is in giving them operational definition. The more refined the definition becomes, the more delimited it becomes; thus more terms become required. The single term which perhaps best delineates the letters to the schizophrenics from the other two groups is Laing's disconfirmation (Laing, 1961). However, operational definition becomes difficult if not impossible. In Laing's terms:

It may be that there are some areas of a person's being for which there is a more crying need for confirmation than others (Laing, 1961, p. 90).

Nonetheless, it would seem that psychologists sensitized to verbal nuances can distinguish between levels of communication which are so nebulously defined.

Definition of terms has typically grown out of the work of the individual theorist, or been derived as a cluster of factors. One possible route to the definition of terminology may be consensual validation by a group of experts. Certainly, the task of refining terms in family process research still lies ahead.

One of the interesting findings to grow out of this study is the possible differences in sensitivity between male and female experts. It is not known whether or not this was an artifact of experimental design. The finding, however, opens up some interesting possibilities for research, not only with respect to written communication. Should these differences stand under future investigation, there would be interesting implications for previous and future research, particularly research employing judges.

Hopefully, the present study has also reaffirmed the usefulness of letters in the study of family communication. Anyone who has read Letters from Jenny (Allport, 1965) knows that the responses made by Jenny's son were inextricably a function of the messages received.

## CHAPTER V

### SUMMARY

Existing family process research supports the assumption that families with a disturbed child manifest different patterns of inter-relating. Communication theorists for the past twelve years have assumed that these differences in communication patterns have etiological relationships to the behavior disorders. Mishler and Waxler (1968b) have pointed out that the differences in communication patterns can be explained in three ways: (1) situational --- an accommodation on the part of the family to a unique situation such as having a child hospitalized; (2) responsive --- an accommodating response to the presence of deviant behavior in a family member; or (3) etiological --- an ongoing style of communication predating the onset of the behavior disorder and inferred to have a causal relationship.

Other studies have failed to support the situational interpretation. The present study was undertaken to help clarify the responsive-etiological issues.

Cerebral palsy results in physiologically caused deviant behavior and requires accommodation on the part of the family. It was reasoned that if the mother-child interaction patterns were no difference for cerebral palsied children than the mother-child inter-



action patterns of either schizophrenics or delinquents, this would be evidence for a responsive interpretation. If, on the other hand, significant differences were found, an etiological interpretation would become more plausible.

Letters written by mothers to their children were collected from 10 schizophrenic adolescents, 10 delinquent adolescents and 10 cerebral palsied adolescents. All of the subjects were institutionalized. Individuals from each group were matched on the basis of race, age, socio-economic status, religious affiliation and the presence of parents in the home.

Nine psychology students, acting as judges, blindly sorted the 30 letters which had identifying information deleted. In each of the nine independent sortings, the number of correct choices made had a probability of random occurrence of less than .05. Female experts were more accurate than male experts ( $P = .05$ ). However, experts who were given an orientation period to communication theory did not differ significantly from experts who were not given the orientation.

Half the subjects of the study were male; half were female. No differences in judges' sortings were found between the two populations. The subjects were ranked by institution staff members for severity of involvement and acuteness or chronicity. No relationships between their rankings and judges' sortings were found. Independent tallies for eight communication patterns could not be transposed from one judge to another in meaningful fashion.

In addition to the experts' sortings, three housewives with

five to eight children each were asked to sort the letters into three stacks from liked most to liked least. They were told that the experimenter was interested in the mothers' attitudes toward their children. No meaningful relationships could be inferred between the housewives' ratings and either the experts sortings or the diagnostic categories.

The results of the expert judges' sortings were viewed as supporting an etiological interpretation of the relationship between family communication patterns and the behavior disorders.

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## **APPENDIX**

# APPENDIX A

## DESCRIPTION OF SUBJECTS

Race			Age			Mother's Age			Parents in Home		
<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>
W	W	W	14-11	14-10	15-2	42	41	41	Mother <sup>1</sup>	Mother <sup>1</sup>	Mother
W	W	W	14-3	14-1	15-0	42	38	44	Both <sup>2</sup>	Both <sup>2</sup>	Both
W	W	W	15-0	15-0	11-2	59	67	64	Both <sup>3</sup>	Both <sup>3</sup>	Both
W	W	W	15-10	14-9	15-2	39	31	41	Both <sup>2</sup>	Both <sup>2</sup>	Both
W	W	W	14-8	15-1	15-4	43	39	37	Both	Both	Both
I	I	W	14-11	14-10	12-8	44	37	44	Both	Both	Both
W	W	W	13-7	13-0	14-0	36	36	36	Both	Both	Both
W	W	W	15-2	15-5	15-0	39	45	45	Both	Both	Both
N	N	N	15-2	15-2	14-8	39	38	37	Mother	Mother	Mother
W	W	W	16-10	16-3	17-0	65	59	57	Both <sup>3</sup>	Both <sup>3</sup>	Both

S = Schizophrenic; D = Delinquent; CP = Cerebral Palsied.

1 = Father dead; 2 = Stepfather in home; 3 = Grandparents.

(Table continued on next page)



Religion**			Occupation of Wage Earner			Rank Among Siblings		
<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>
Christ'n	Baptist	Prot.	Voc. Rehab.	Maid	Waitress	3/3	3/4	3/3
Prot.	Baptist	Prot.	Mechanic	Shoe Repairman	Drapery Salesman	1/2	2/5	1/3
Prot.	Baptist	Prot.	Soc. Sec. AFDC	AFDC	AFDC	9/10	7/7	6/6
Meth.	Baptist	Ch. Christ	Owms business	Owms business	Chemical sales	1/4	1/4	2/3
Meth.	Baptist	Presb.	Mechanic	Carpenter	Construction work	3/4	1/3	3/3
Baptist	Baptist	Baptist	Farm laborer	Farm laborer	Farm laborer	4/4	6/4	5/5 (twin)
Prot.	Holiness	Prot.	Skilled factory	Skilled factory	Construction work	4/1	4/1	4/1
Meth.	Mormon	Prot.	Laboratory assistant	Skilled laborer	Skilled laborer	2/1	2/1	3/1
Baptist	Baptist	Prot.	AFDC	AFDC	Barber	13/8	5/2	4/2
Baptist	Holiness	Baptist	Retired trucker	Retired laborer	Retired farmer	1/1*	1/1*	1/1*

\* Siblings not in parental figure home.

\*\* Protestant sect (Prot.) was sometimes expressed without denominational preference.

(Table continued on next page)

IQ			No. of Admissions			Months in Institution			Chronic or Acute		
<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>	<u>S</u>	<u>D</u>	<u>CP</u>
101	90	94	1	1	2	19	5	10	C	A	C
83	87	91	1	2	3	21	11	26	C	C	C
75	88	83	1	1	1	48+	5	8	C	C	C
93	107	95	1	1	6	2	5	48+	C	A	C
100	105	82	1	1	1	15	7	8	C	C	C
Est. avg.	96	74	2	1	6	10	6	39	C	C	C
100	86	85	1	1	3	19	5	6	C	A	C
Est. avg. +	Est. avg. +	Est. mild retard.	1	1	3	3	3	10	A	A	C
84	85	85	1	2	6	19	8	39	C	C	C
75	89	106	4	3	5	24+	10	23	C	C	C

# APPENDIX B

## RESULTS OF JUDGES' SORTINGS BY CASES\*

Subject		Instructed Experts, Male			Instructed Experts, Female			Uninstructed Experts			Hits	Naive Judges**		
Type	Sex	1	2	3	4	5	6	7	8	9		10	11	12
CP	M	x	x	x	x	x	x	x	x	x	9	1	2	2
CP	M	x	x	x	x	x	x	x	D	x	8	2	2	1
CP	F	D	x	x	x	x	x	x	x	x	8	2	1	2
D	M	x	x	x	x	x	S	x	x	x	8	2	3	1
CP	F	x	D	x	x	x	x	x	x	S	7	1	1	1
S	M	D	x	x	x	x	D	x	x	x	7	3	3	1
D	M	x	S	S	x	x	x	x	x	x	7	3	2	3
S	M	x	x	x	x	x	x	x	D	D	7	3	3	2
D	F	x	x	x	x	S	S	x	x	x	7	2	2	1
D	F	x	x	CP	S	x	x	x	x	x	7	1	2	1
S	M	x	x	D	x	D	x	x	CP	D	5	2	3	1
S	M	D	CP	x	x	x	x	x	D	CP	5	1	3	1

\*The symbol "X" designates a correct choice; otherwise the incorrect choice is specified.

\*\*1 = Liked most; 2 = Liked less; 3 = Liked least.

(Table continued on next page)

Type	Sex	1	2	3	4	5	6	7	8	9		10	11	12
D	F	x	x	x	S	S	S	x	S	x	5	2	1	1
S	M	x	CP	x	x	x	x	CP	CP	CP	5	3	2	1
CP	F	D	D	x	x	x	x	D	x	S	5	1	3	2
D	F	x	S	S	x	x	x	S	S	x	5	3	3	1
S	F	CP	x	CP	CP	CP	x	x	x	x	5	3	1	1
CP	F	S	x	x	D	x	S	D	x	x	5	3	1	2
CP	F	x	D	D	x	x	S	D	x	x	5	2	1	3
S	F	D	x	x	x	x	x	CP	D	D	5	2	1	1
D	F	S	x	CP	CP	S	x	x	x	S	4	1	1	1
D	M	x	S	S	S	x	S	x	S	x	4	3	3	1
S	F	x	x	D	CP	CP	x	CP	CP	x	4	1	3	1
D	M	S	S	x	x	x	x	S	S	S	4	1	3	3
D	M	S	S	S	x	x	x	S	S	S	3	3	3	3
CP	M	D	D	S	D	D	S	x	x	S	2	1	3	1
S	F	D	D	CP	D	D	CP	x	D	x	2	1	1	1

(Table continued on next page)

Type	Sex	1	2	3	4	5	6	7	8	9	10	11	12	
S	F	D	x	CP	D	CP	CP	CP	D	CP	1	2	1	1
CP	M	D	D	S	D	S	D	S	x	S	1	3	3	1
CP	M	D	S	D	S	S	S	x	D	S	1	1	1	1
Total Hits		15	16	15	18	19	18	19	15	16				
Probability		.04	.02	.04	.003	.0008	.003	.0008	.04	.02				

APPENDIX C

SAMPLES OF LETTERS WITH MAXIMAL INTERJUDGE AGREEMENT

Display 1

Mr. Bill Flowers  
Box 252 Yourtown, Okla.

Any Town, Okla.  
June 9, 1967

Dear Bill,

After so long<sup>1</sup> I will write you a few lines. How are you getting along? Brenda and Tom<sup>2</sup> came home for Mothers day sure was glad to see them your brother Benjamin is<sup>3</sup> on the battle ship Saratoga off the Coast of Greece and Crete Darlene<sup>3</sup> is still in Jacksonyille Florida. We all went out to the lake on a picnic when Tom & Brenda<sup>2</sup> was here sure had a nice time Are you in the mood to write you Mother a long letter? Angela<sup>4</sup> is down at Joe & Ginny's<sup>5</sup> for a week. I hope you get on the ball and write me as I am always glad to hear from you and to know how you are. Barbara<sup>6</sup> and her son are here on a visit she has put her application for work but so far no one has called her. I plan on going over to my sisters in (town 20 miles from institution) after the first of July Might be I can get on down and see you I miss you very much and always will love you dont believe anything different. You will be there (a period of time) in August try to write me before the 1st of July

as ever your Mother

Anna Lee<sup>9</sup> & all

Im in a hurry to write this for its time for the mail man I'll write more later. Im sending you some pictures of your grandMother<sup>7</sup> and me and you kids and Sam<sup>8</sup> and Angela<sup>4</sup> hope you like them. Keep them if you want them send them back so I can get some reprints.

Your Mother

---

<sup>1</sup>Four months or longer  
<sup>2</sup>Adult sister and husband  
<sup>3</sup>Adult sister  
<sup>4</sup>Younger sister  
<sup>5</sup>Sister and husband  
<sup>6</sup>Adult sister

<sup>7</sup>Maternal grandmother  
<sup>8</sup>Younger brother  
<sup>9</sup>Mother

Display 2

49 N. Quebec  
Anytown, Okla.

Dear Son,

How are you by now? I wrote you one letter and put the wrong addres on it and got it back today. Ill be more careful now. Son Im sorry I sent you the wrong kind of cigts. Ill have to be more careful about selecting them.

Son Im not sure that Ill get to visit you the 18th. You know that I may not be able to get any one to take us, So be good anyway (clause omitted).

Wanda<sup>1</sup> came down and spent the after noon with us. I haven't seen Sharon<sup>2</sup> in a week. Mark<sup>3</sup> is still working out.

Well Son I guess Ill close for now. I saw Don's<sup>4</sup> grandmother at the laundry today. She seems to be getting along alright. Tell Bill<sup>5</sup> hi for me.

Bye for now

With Love

Mom.

---

<sup>1</sup>22-year-old sister.

<sup>2</sup>20-year-old sister living out of home.

<sup>3</sup>21-year-old brother who is trustee in County Jail.

<sup>4</sup>15-year-old friend in boys' training school.

<sup>5</sup>Friend at institution.

Display 3

May 28, 1968  
Anytown, Okla.

Dear Jerry,

How are you today? We are all just fine.

What are you studying in school this week? Ricky and Bobby<sup>1</sup> are really anxious for school to end now. Ricky, has been working on an insect collection for Science, but Bobby has been catching most of the bugs for him. (ha ha)

We have all been busy working in our garden & flowers this week, and everything looks real nice.

Dad said to tell you hello, and that he is planning a fishing trip for the two of you this weekend.

How often do you go swimming now? Do you and Phillip<sup>2</sup> go swimming on the same day? Maybe sometime during the summer Phillip could come and spent the weekend with you.

Well, Jerry I'll close for now. Have a nice week. I will pick you up on Friday. (Bye for now.)

Love,

Mother

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<sup>1</sup>Two younger brothers.

<sup>2</sup>Friend at institution.



APPENDIX D

SAMPLES OF LETTERS WITH MINIMAL INTERJUDGE AGREEMENT

Display 1

Sunday, Feb. 16  
1969

Dear Jenny,

Your Daddy was going to come over there this week-end, but he had to wrok at Waring.

We had a big surprize here when we woke up Saturday morning. A big beautiful snow. There sure were some cute snowmen around here and snowball fights. We made snow ice cream. The kids around here were all flying kites before the bad weather. We got Rick & Madeleine one.<sup>1</sup> Did you have a Vlaentine's Day Party? Did you know that this old Skinny Rabbitt was going to have a birthday in a couple of days? I think your birthday list. We will have to start to work on it. Shelly & Judy<sup>2</sup> are coming to visit soon. They both work for the Whamo-Toy makers out in Calif. Joyce<sup>3</sup> may get to come for a visit too with them.

Love

The Skinny Rabbitt<sup>4</sup>

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<sup>1</sup>9-year-old brother and 3-year-old sister.

<sup>2</sup>Cousins.

<sup>3</sup>Cousin also in California.

<sup>4</sup>Mother.

Display 2

March 12 - 1969

Dearest Elanor

I will write you a few lines this morning how are you fine We hope  
We are all ok

We are Just a bout moved We still like a few things they are going  
to put the pump in to day<sup>1</sup>

honey Why havent you wrote to us it has been over a week. Sence We  
got a letter from you

I worry my head off When We dont here from you so plese Write

how do you like school sure hope you like it

did you get your coat and things ok did I sent what you wanted

you should see the house<sup>2</sup> We put a big bed and a half bed in the  
big bed room and a Dresser and I

(top of page two)

here is the new address  
(address)  
(town)

am going to put Richie's<sup>3</sup> TV in there and there is plenty of room I  
think you will like it We havent got the liveing room furniture  
moved yet

Bill Underwood<sup>4</sup> brought me some Rugs for the kitchen they are real  
pretty

they sead tell you Hello Sherry<sup>5</sup> called me Monday to see if We had  
heard from you

She sead she had Wrote you a letter but hadent gotton it mailed yet

Darlene<sup>6</sup> Richie<sup>3</sup> Pat<sup>7</sup> and Daddy sead tell you Hello and thay Love  
you

have you heard from Grandma and Grandpa<sup>8</sup> yet

Will Sweet heart I better close for this time and get some more things  
packed to move so you write real soon please We Love to here from  
you so We Will no know you are geting along and We Love you asn real soon

All our love

Mom Dad & kids

- 
- <sup>1</sup>Water pump in new house.
  - <sup>2</sup>In process of moving.
  - <sup>3</sup>10-year-old brother.
  - <sup>4</sup>Friend of father.
  - <sup>5</sup>Best girlfriend.
  - <sup>6</sup>11-year-old sister.
  - <sup>7</sup>5-year-old sister.
  - <sup>8</sup>Maternal grandparents.

Display 3

Anytown, Oklahoma  
April 16, 1969

Dear George:

I hope you are well.

We will be coming after you tomorrow afternoon. You won't be coming home. You will go to Oklahoma City for heart check up.<sup>1</sup> It will probably be a different kind this time.

Grandpa<sup>2</sup> and I went to the revival last night. It sure was a good service. I talked to Mary.<sup>3</sup> She was asking all about you. The preacher's wife said. "they were praying for you." I am very thankful for that.

Its cloudy and rainy looking this morning. It is 64° Very nice.

Leona<sup>4</sup> went on a field trip yesterday with the kindergarten class. She gets a bang out of working with the children.

Well I have work to do. So I better get busy. I'll be seeing you the 17th. bye! bye!

With love

your grandma

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<sup>1</sup>Has history of heart murmur, but no overt consequences.

<sup>2</sup>Grandparents (paternal) have been the parental figures since 6 months of age.

<sup>3</sup>A friend, same age as George.

<sup>4</sup>Neighbor.